



Commonwealth of Massachusetts

Department of Public Safety

APPLICATION FOR ELEVATOR ANNUAL TEST OF SAFETY DEVICES & FIREFIGHTER SERVICE OVERTIME AT NIGHT

Send application to: Department of Public Safety, P.O. Box 3814, Boston, MA 02241-3814

Location Name	Street Address	City, State, Zip
Owner Name	Owner Street Address	City, State, Zip
Owner E-Mail	Owner Phone Number	
Elevator Company	Elevator Company Street Address	City, State, Zip
Elevator Company Registration Number	Elevator Company E-Mail	Elevator Company Phone Number

<u>State ID Number</u>	<u>Inspection Fee</u> \$400	SFOO (Y/N)	<u>Check #</u>	<u>Receipt #</u> DPS use only	<u>Fire Service</u> <u>OT Fee \$400</u>	<u>Receipt #</u> DPS use only	<u>Total Fee</u>
		Y N					

You must submit one application and one check for each elevator. The Department is not responsible for verifying correct State ID Numbers on applications. Incomplete or incorrect applications will be returned.

The elevator unit listed above will be scheduled for inspection by the Department of Public Safety. I understand that the elevator to be inspected should be pre-inspected and made ready for the state safety inspection. Elevators inspected and found in non-compliance will be issued a DPS Work Order. Unsafe Elevators will be shut down pending repair and re-inspection. Elevators issued 90 day temporary certificates will be re-inspected 90 days from the annual test date unless an extension is granted. Failure to be ready for or failure to pass the 90 day re-test will result in the elevator being shut down. Elevators shut down must re-apply for inspection with applicable additional fees, and will remain shut down until they are re-inspected and certified as safe.

Standard fee for annual inspection is \$400 per unit. The fee for overtime inspection is \$400 additional.

Signature of Applicant

Print Name of Applicant Legibly

E-mail of Applicant

Date

Please Note: Certificates and work orders will be sent to the e-mail of the applicant listed above and to the owner.

***Send application and non-refundable check payable to "Commonwealth of Massachusetts"
To: Department of Public Safety, P.O. Box 3814 Boston, MA 02241-3814***

Note: Application fee is for the unit on behalf of owner, DPS will not issue refund if there is a loss of contract with the service company.